

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: 2003

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

PHA Plan Agency Identification

PHA Name: Brackettville Housing Authority

PHA Number: TX239

PHA Fiscal Year Beginning: (mm/yyyy) 07/2003

PHA Plan Contact Information:

Name: June Kaminski

Phone: (830) 563-2513

TDD: (830) 563-2513

Email (if available): bhakco@hilconet.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

- ☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan Fiscal Year 2003

[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

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ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

At PHA option, provide a brief overview of the information in the Annual Plan

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

The Housing Authority of the City of Brackettville is not proposing any changes in Policy at this time. Changes to the Annual Plan and the Five Year Action Plan have been made to accommodate the electrical upgrade of the apartments to meet current code and REAC requirements. All previous work items have remained in the 5-Year Plan, but have been reprogrammed. .

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

- What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$87,405.00.
- ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C.

1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
- B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ _____
- C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.
- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☒ Yes ☐ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are provided below.
3. In what manner did the PHA address those comments? (select all that apply)
 - ☒ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - ☒ Yes ☐ No: below or
 - ☐ Yes ☐ No: at the end of the RAB Comments in Attachment E.
 - ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.

☒ Other: (list below)

Comments: the request for work items not previously included in the Plan include the following – fencing TX1 family sites and TX2 (2003 & 2004); small exterior storage rooms for TX1 (2007 and additional years); the remainder of the requests were already included in the PHA Plan – air conditioning (2005,06 and 07), and carports (2006, 07).

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

State of Texas

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

- The State of Texas' Consolidated Plan does not support the Authority's update submission through specific actions and commitments.

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

- Any change to the Mission Statement;

- 50% deletion from or addition to the goals and objectives as a whole;
- 50% or more decrease in the quantifiable measurement of any individual goal or objective.

B. Significant Amendment or Modification to the Annual Plan:

- A change of more than 50% in the funding amount projected in the Financial Resource Statement and/or the capital Fund Program Annual Statement;
- Any change in a policy or procedure that requires a regulatory 30 day posting.

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
N/A	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
N/A	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development X check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
N/A	Section 8 rent determination (payment standard) policies Check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
N/A	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any required policies governing any Section 8 special housing types check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
N/A	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
N/A	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
N/A	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
N/A	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
N/A	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
N/A	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
N/A	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
N/A	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Brackettville Housing Authority		Grant Type and Number Capital Fund Program: TX59-P239-50103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	8,000			
3	1408 Management Improvements	6,000			
4	1410 Administration	2,500			
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	6,500			
8	1440 Site Acquisition				
9	1450 Site Improvement	13,660			
10	1460 Dwelling Structures	33,745			
11	1465.1 Dwelling Equipment—Nonexpendable	1,500			
12	1470 Nondwelling Structures	15,000			
13	1475 Nondwelling Equipment	500			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	87,405			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: Brackettville Housing Authority		Grant Type and Number Capital Fund Program: TX59-P239-50103 Capital Fund Program Replacement Housing Factor Grant No:			Federal FY of Grant: 2003
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Performance and Evaluation Report for Period Ending:		<input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Final Performance and Evaluation Report			
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures				

<p>A file of Annual Accident Incident reports, using the San Angelo PHA form, will be maintained in the central San Angelo PHA accident file.</p> <p>ANNUAL REVIEWS OF THE SAFETY PROGRAM:</p> <p>A file of Annual Reviews of the Safety Program reports, using the San Angelo PHA form, will be maintained at the central San Angelo PHA accident file.</p> <p>The Executive Director will perform annual checks of the records for inclusion of all required safety documentation as described in this policy.</p>									
PHA Name: Brackettville Housing Authority			Grant Type and Number Capital Fund Program #: TX59-P239-50103 Capital Fund Program Replacement Housing Factor #:			Federal FY 2003		Grant:	
Part II Supplemental Activities I, 4.2 and Program Replacement Housing Factor (CFP/CFPRHF)	Development Number	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Funds Obligated
	Name/Housing Authority-Wide Activities				Original	Revised			
	PHA-Wide	Operations	1406		8,000				
	PHA-Wide	Management Improvements Computer hardware/software, travel, training	1408		6,000				
	PHA-Wide	Administration Program administration, advertising	1410		2,500				
	PHA-Wide	Fees and Costs Design services, preparation of annual submittal	1430		6,500				
	TX-1 TX-2	Site Improvements Landscaping, fencing Landscaping, site lighting	1450		8,075				
	TX-1	Dwelling Structures Bathroom upgrade	1460		39,330				
	PHA-Wide	Dwelling Equipment Water heaters	1465		1,500				
	PHA-Wide	Non-Dwelling Structures Maintenance building/haz-mat storage	1470		15,000				
	PHA-Wide	Non-Dwelling Equipment Maintenance equipment	1475		500				
		Total			87,405				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: Brackettville Housing Authority		Grant Type and Number Capital Fund Program #: TX59-P239-50103 Capital Fund Program Replacement Housing Factor #:				Federal FY of Grant: 2003		
Development Number Name/Housing Authority-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

<div>CFP 5-Year Action Plan</div> <div><input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement</div>		
Development Number	Development Name (or indicate PHA wide)	
TX59-P239-50101	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)

Operations	8,000	2004
Management Improvements, computer hardware, software annual maintenance	6,000	
Program Administration, advertising	2,500	
Design Services – to include surveys of 3 sites in TX1 and 1 in TX2	10,000	
Site Work – fencing @ TX1, TX2	13,190	
Dwelling Structures – Kitchen upgrade @ TX2, bathroom upgrade @ TX2, paint	41,215	
Dwelling Equipment – ranges, refrigerators, water heaters	1,500	
Non-Dwelling Equipment	5,000	
Operations	8,000	2005
Management Improvements, computer hardware, software, annual maintenance	6,000	
Program Administration, advertising	2,500	
Design Services	6,500	
Landscaping @ TX1 and TX2	3,397	
Dwelling Structures – central HVAC @ TX1	46,008	
Non-Dwelling Equipment, car and maintenance equipment	15,000	
Operations	8,000	2006
Management Improvements, computer hardware, software, annual maintenance	6,000	
Program Administration, advertising	2,500	
Design Services	10,000	
Dwelling Structures - Central HVAC @ TX1	46,777	
Non-Dwelling Structures – carports @ TX1	14,128	
Operations	8,000	2007
Management Improvements, computer hardware, software, annual maintenance	6,000	
Program Administration, advertising	2,500	
Design Services	10,000	
Dwelling Structures - windows and exterior closets @ TX1, central HVAC @ TX2	53,705	
Non-Dwelling Structures – carports @ TX2	7,200	
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Table Library		

Total estimated cost over next 5 years	437,025	
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PHA Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with Instructions located in applicable PIH Notices.

Section 1: General Information/History

A. Amount of PHDEP Grant \$_____

B. Eligibility type (Indicate with an “x”) **N1**_____ **N2**_____ **R**_____

C. FFY in which funding is requested _____

D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area. Unit count information should be consistent with that available in PIC.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program proposed under this Plan (place an “x” to indicate the length of program by # of months. For “Other”, identify the # of months).

12 Months_____ **18 Months**_____ **24 Months**_____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an “x” by each applicable Year) and provide amount of funding received. If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. The Fund Balances should reflect the balance as of Date of Submission of the PHDEP Plan. The Grant Term End Date should include any HUD-approved extensions or waivers. For grant extensions received, place “GE” in column or “W” for waivers.

Fiscal Year of Funding	PHDEP Funding Received	Grant #	Fund Balance as of Date of this Submission	Grant Extensions or Waivers	Grant Start Date	Grant Term End Date
FY 1995						
FY 1996						
FY 1997						
FY1998						
FY 1999						

Section 2: PHDEP Plan Goals and Budget

A. PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FFY _____ PHDEP Budget Summary	
Original statement	
Revised statement dated:	
Budget Line Item	Total Funding
9110 – Reimbursement of Law Enforcement	
9115 - Special Initiative	
9116 - Gun Buyback TA Match	
9120 - Security Personnel	
9130 - Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150 - Physical Improvements	
9160 - Drug Prevention	
9170 - Drug Intervention	
9180 - Drug Treatment	
9190 - Other Program Costs	
TOTAL PHDEP FUNDING	

C. PHDEP Plan Goals and Activities

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may be inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise—not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – Reimbursement of Law Enforcement					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDE P Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9115 - Special Initiative					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount/ Source)	Performance Indicators
1.							
2.							
3.							

9116 - Gun Buyback TA Match					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9120 - Security Personnel					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9130 – Employment of Investigators					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9140 – Voluntary Tenant Patrol					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9150 - Physical Improvements					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9160 - Drug Prevention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9170 - Drug Intervention					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9180 - Drug Treatment					Total PHDEP Funding: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHDEP Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

9190 - Other Program Costs					Total PHDEP Funds: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Person s Served	Target Population	Start Date	Expected Complete Date	PHEDep Funding	Other Funding (Amount /Source)	Performance Indicators
1.							
2.							
3.							

Required Attachment D: Resident Member on the PHA Governing Board

1. ☒ Yes ☐ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

Paulita Garza
P.O. Box 248
Brackettville, TX 78832

B. How was the resident board member selected: (select one)?

- ☐ Elected
☒ Appointed

C. The term of appointment is (include the date term expires):

Two year term to end 9/2004

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.
☐ Other (explain):

B. Date of next term expiration of a governing board member: 01/06/05

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Carmen Berlanger
The Mayor of the City of Brackettville, TX.

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Janie Gonzalez, President
P.O. Box 1756
Brackettville, TX 78832

Mary Padilla
P.O. Box 1516
Brackettville, TX 78832

Narieda Pena, Vice President
P.O. Box 1534
Brackettville, TX 78832

Polo Rocha
P.O. Box 1172
Brackettville, TX 78832

Rebecca Garcia, Secretary
P.O. Box 1943
Brackettville, TX 78832

Paulita Garza
P.O. Box 248
Brackettville, TX 78832

Required Attachment F: Component 10 (B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? 2
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? 0
- c. How many Assessments were conducted for the PHA's covered developments? 2
 - d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: 0

Required Attachment G: RASS Follow-up Plan

The Brackettville Housing Authority will initiate a Follow-Up Plan in response to the below average score they received on the Communication component of the Resident Assessment. In order to keep the residents of the Housing Authority of the City of Brackettville better informed, the Housing Authority will begin a newsletter to be distributed to the residents on at least a quarterly basis. The newsletter will include information about monthly meeting schedules, scheduled maintenance activities, modernization efforts and reminders about various parts of the lease that may address a timely problem.

Attachment H: Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF) Part 1:
Summary

HA Name:	Grant Type and Number: TX59P23950100	FFY of Grant
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950100	Approval:
	Replacement Housing Factor Grant No.:	2000

<input type="checkbox"/> Original Annual Statement XX Performance and Evaluation Report for Period Ending: 12/2002	<input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Final Performance and Evaluation Report	XX Revised Annual Statement (Revision No.: 2)
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Line No.	Summary by Development Account		Total Estimated Cost		Total Actual Cost	
			Original	Revised	Obligated	Expended
1	Total Non-CFP Funds		0	0	0	0
2	1406	Operations	8,000	8,000	8,000	8,000
3	1408	Management Improvements Soft Costs	3,150	2,073	2,073	2,073
		Management Improvements Hard Costs	0	0	0	0
4	1410	Administration	1,500	511	511	511
5	1411	Audit	0	0	0	0
6	1415	Liquidated Damages	0	0	0	0
7	1430	Fees and Costs	7,300	7,300	7,300	1,457
8	1440	Site Acquisition	0	0	0	0
9	1450	Site Improvements	0	14,543	14,543	547
10	1460	Dwelling Structures	54,699	53,348	53,348	39,456
11	1465.1	Dwelling Equipment-Nonexpendable	8,100	0	0	0

12	1470	Nondwelling Structures	6,439	0	0	0
13	1475	Nondwelling Equipment	2,000	5,413	5,413	1,113
14	1485	Demolition	0	0	0	0
15	1490	Replacement Reserve	0	0	0	0
16	1492	Moving to Work Demonstration	0	0	0	0
17	1495.1	Relocation Costs	0	0	0	0
18	1499	Development Activities	0	0	0	0
19	1502	Contingency	0	0	0	0
20	Amount of Annual Grant (Sum of lines 2-19)		91,188	91,188	91,188	53,157
	Amount of line 20 Related to LBP Activities		0	0	0	0
	Amount of line 20 Related to Section 504 Compliance		0	0	0	0
	Amount of line 20 Related to Security - Soft Costs		0	0	0	0
	Amount of line 20 Related to Security - Hard Costs		0	0	0	0
	Amount of line 20 Related to Energy Conservation Measures		0	0	0	0
	Collateralization Expenses or Debt Service		0	0	0	0

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Factor
 (CFP/CFPRHF)
 Part II: Supporting Pages

HA Name:	Grant Type and Number: TX59P23950100	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950100 Replacement Housing Factor Grant No.:	2000

Development Number	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Obligated	Expended	Status of Work
Name/HA-Wide Activities				Original	Revised			
HOUSING AUTHORITY TOTAL:				91,188	91,188	91,188	52,610	
				=====	=====	=====	=====	
PHA Wide	OPERATIONS	1406		8,000	8,000	8,000	8,000	
				-----	-----	-----	-----	
				-----	-----	-----	-----	
PHA Wide	MANAGEMENT IMPROVEMENTS	1408		3,150	2,073	2,073	2,073	
				-----	-----	-----	-----	
				-----	-----	-----	-----	
	software upgrade			1,150	0	0	0	
	training			2,000	2,073	2,073	2,073	
PHA Wide	ADMINISTRATION	1410		1,500	1,500	511	511	
				-----	-----	-----	-----	
				-----	-----	-----	-----	
	advertising, printing			1,000	11	11	11	
	program administration			500	500	500	500	
PHA Wide	FEES AND COSTS	1430		7,300	7,300	7,300	1,457	
				-----	-----	-----	-----	

	construction design, construction administration		7,300	7,300	7,300	362
	SITE IMPROVEMENTS	1450	0	14,543	14,543	547
TX-1	fencing		0	13,993	13,996	0
TX-1	sidewalk repairs		0	547	547	547
	DWELLING STRUCTURES	1460	52,146	53,348	53,348	39,456
TX-1	replace windows		0	0	0	0
TX-1	heavy gauge window screens		2,302	15,051	15,051	589
TX-1	heavy gauge screen doors		9,300	0	0	0
TX-1	paint and repair exteriors		36,432	36,432	36,432	36,432
TX-2	heavy gauge screen doors		4,800	4,800	0	0
TX-2	shower repairs		1,090	1,090	1,090	1,090
TX-2	cabinet repairs		775	775	775	775

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Factor
 (CFP/CFPRHF)
 Part II: Supporting Pages

HA Name:	Grant Type and Number: TX59P23950100	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950100 Replacement Housing Factor Grant No.:	2000

Development Number	General Description of Major Work Categories	Development Account Number	Quantity	Total Estimated Cost		Obligated	Expended	Status of Work
Name/HA-Wide Activities				Original	Revised			
PHA Wide	DWELLING EQUIPMENT	1465		8,100	0	0	0	

	ranges, refrigerators, water heaters			8,100	0	0	0	
PHA Wide	NON-DWELLING STRUCTURES	1470		6,439	0	0	0	

	maintenance/haz. Materials storage			6,439	0	0	0	
PHA Wide	NON-DWELLING EQUIPMENT	1475		2,000	5,413	5,413	1,113	

lawn maintenance equipment

2,000

5,413

5,413

1,113

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Factor
(CFP/CFPRHF)
Part III: Implementation Schedule**

HA Name:	Grant Type and Number: TX59P23950100	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950100 Replacement Housing Factor Grant No.:	2000

Development Number	All Funds Obligated	All Funds Expended	Reasons for Revised Target Dates
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Name/HA-Wide Activities	Original	Revised (Attach explanation)	Actual	(Quarter Ending Date)		
				Original	Revised (Attach explanation)	Actual
TX-1	6/2002			3/2003		

Attachment I: Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF) Part 1: Summary

HA Name:	Grant Type and Number: TX59P23950101	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950101 Replacement Housing Factor Grant No.:	2001

☐ Original Annual Statement
 ☐ Reserve for Disasters/Emergencies
 XX Revised Annual Statement (Revision No.: 1)

XX Performance and Evaluation Report for Period Ending: 12/2002

☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total Non-CFP Funds	0	0	0	0
2	1406 Operations	8,488	8,488	0	0
3	1408 Management Improvements Soft Costs	7,000	0	0	0
	Management Improvements Hard Costs	0	0	0	0

4	1410	Administration	1,500	1,500	500	0
5	1411	Audit	0	0	0	0
6	1415	Liquidated Damages	0	0	0	0
7	1430	Fees and Costs	7,000	7,000	7,000	0
8	1440	Site Acquisition	0	0	0	0
9	1450	Site Improvements	8,350	0	0	0
10	1460	Dwelling Structures	52,233	61,998	7,983	0
11	1465.1	Dwelling Equipment-Nonexpendable	8,100	13,685	12,502	0
12	1470	Nondwelling Structures	0	0	0	0
13	1475	Nondwelling Equipment	0	0	0	0
14	1485	Demolition	0	0	0	0
15	1490	Replacement Reserve	0	0	0	0
16	1492	Moving to Work Demonstration	0	0	0	0
17	1495.1	Relocation Costs	0	0	0	0
18	1499	Development Activities	0	0	0	0
19	1502	Contingency	0	0	0	0
20	Amount of Annual Grant (Sum of lines 2-19)		92,671	92,671	27,985	0
	Amount of line 20 Related to LBP Activities		0	0	0	0

Amount of line 20 Related to Section 504 Compliance	0	0	0	0
Amount of line 20 Related to Security - Soft Costs	0	0	0	0
Amount of line 20 Related to Security - Hard Costs	0	0	0	0
Amount of line 20 Related to Energy Conservation Measures	0	0	0	0
Collateralization Expenses or Debt Service	0	0	0	0

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF)
Part II: Supporting Pages

HA Name:	Grant Type and Number: TX59P23950101	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950101	2001
	Replacement Housing Factor Grant No.:	

Development		General Description of Major Work	Develop- ment Account Number	Quantity					
Number					Total Estimated Cost				Status of Work
Name/HA-Wide	Categories				Original	Revised	Obligated	Expended	
Activities									
HOUSING AUTHORITY TOTAL:					92,671	92,671	27,985		
					=====	=====	=====		
PHA Wide	OPERATIONS		1406		8,488	8,488	0	0	

PHA Wide	MANAGEMENT IMPROVEMENTS	1408	7,000	0	0	0
	computer upgrade		3,000	0	0	0
	training/travel		4,000	0	0	0
PHA Wide	ADMINISTRATION	1410	1,500	1,500	500	0
	advertising, printing		1,000	1,000	0	0
	program administration		500	500	500	0
PHA Wide	FEES AND COSTS	1430	7,000	7,000	7,000	0
	construction design, construction administration		7,000	7,000	7,000	0

TX-1	rebuild unit 4	15,000	0	0	0
TX-2	electrical upgrade	0	54,765	750	0

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF)
 Part II: Supporting Pages

HA Name:	Grant Type and Number: TX59P23950101	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950101 Replacement Housing Factor Grant No.:	2001

Development Number	General Description of Major Work	Develop ment	Quantity
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Activities	Name/HA-Wide	Categories	Account Number	Total Estimated Cost		Obligated	Expended	Status of Work
				Original	Revised			
PHA Wide	DWELLING EQUIPMENT		1465	8,100	13,685	12,502	0	

		ranges, refrigerators, water heaters		8,100	13,685	12,502	0	

Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF)
 Part III: Implementation Schedule

HA Name:	Grant Type and Number: TX59P23950101	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950101 Replacement Housing Factor Grant No.:	2001

Development Number Name/HA-Wide Activities	All Funds Obligated			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual	
TX-1	3/2003	6/2003		6/2004			

Attachment J: Annual Statement/Performance and Evaluation Report
 Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF) Part 1:
 Summary

HA Name:	Grant Type and Number: TX59P23950102	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950102 Replacement Housing Factor Grant No.:	2002

<input type="checkbox"/> Original Annual Statement	<input type="checkbox"/> Reserve for Disasters/Emergencies	XX Revised Annual Statement (Revision No.: 1)
XX Performance and Evaluation Report for Period Ending: 12/2002		<input type="checkbox"/> Final Performance and Evaluation Report

Line No.		Summary by Development Account	Total Estimated Cost		Total Actual Cost	
			Original	Revised	Obligated	Expended
1		Total Non-CFP Funds	0	0	0	0
2	1406	Operations	8,000	8,000	0	0
3	1408	Management Improvements Soft Costs	7,000	7,000	0	0
		Management Improvements Hard Costs	0	0	0	0
4	1410	Administration	2,500	2,500	0	0
5	1411	Audit	0	0	0	0
6	1415	Liquidated Damages	0	0	0	0
7	1430	Fees and Costs	6,500	6,500	0	0
8	1440	Site Acquisition	0	0	0	0
9	1450	Site Improvements	2,000	2,000	0	0
10	1460	Dwelling Structures	59,405	59,405	0	0
11	1465.1	Dwelling Equipment-Nonexpendable	1,500	1,500	0	0
12	1470	Nondwelling Structures	0	0	0	0
13	1475	Nondwelling Equipment	500	500	0	0
14	1485	Demolition	0	0	0	0
15	1490	Replacement Reserve	0	0	0	0

16	1492	Moving to Work Demonstration	0	0	0	0
17	1495.1	Relocation Costs	0	0	0	0
18	1499	Development Activities	0	0	0	0
19	1502	Contingency	0	0	0	0
20	Amount of Annual Grant (Sum of lines 2-19)		87,405	87,405	0	0
	Amount of line 20 Related to LBP Activities		0	0	0	0
	Amount of line 20 Related to Section 504 Compliance		0	0	0	0
	Amount of line 20 Related to Security - Soft Costs		0	0	0	0
	Amount of line 20 Related to Security - Hard Costs		0	0	0	0
	Amount of line 20 Related to Energy Conservation Measures		0	0	0	0
	Collateralization Expenses or Debt Service		0	0	0	0

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF)
Part II: Supporting Pages

HA Name:	Grant Type and Number: TX59P23950102	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950102	2002
	Replacement Housing Factor Grant No.:	

Development		General Description of Major Work	Develop ment Account Number	Quantity					
Number	Name/HA-Wide				Categories	Total Estimated Cost		Status of Work	
Activities						Original	Revised	Obligated	Expended
HOUSING AUTHORITY TOTAL:					87,405	87,405	0		
					=====	=====	=====		
PHA Wide	OPERATIONS		1406		8,000	8,000	0	0	

PHA Wide	MANAGEMENT IMPROVEMENTS		1408		7,000	7,000	0	0	

	computer upgrade				3,000	3,000	0	0	
	training/travel				4,000	4,000	0	0	
PHA Wide	ADMINISTRATION		1410		2,500	2,500	0	0	

	advertising, printing				1,000	1,000	0	0	
	program administration				1,500	1,500	0	0	
PHA Wide	FEES AND COSTS		1430		6,500	6,500	0	0	

	construction design, construction administration				6,500	6,500	0	0	

	SITE IMPROVEMENTS		1450		2,000	2,000	0	0	

TX-2	landscaping		2,000	2,000	0	0	
	DWELLING STRUCTURES	1460	59,405	59,405	0	0	
<hr/>							
TX-1	bathroom upgrade		54,205	0	0	0	
TX-1,2	dryer outlets, electrical upgrade		5,200	59,405	0	0	
	DWELLING EQUIPMENT	1465	1,500	1,500	0	0	
<hr/>							
PHA-Wide	water heaters		---	---	---	---	---
			1,500	1,500	0	0	
	NON-DWELLING EQUIPMENT	1475	500	500	0	0	
<hr/>							
PHA-Wide	non-maintenance equipment			500	500	0	0

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Factor (CFP/CFPRHF)
Part III: Implementation Schedule

HA Name:	Grant Type and Number: TX59P23950102	FFY of Grant Approval:
Housing Authority of the City of Brackettville	Capital Fund Program Grant No.: TX59P23950102 Replacement Housing Factor Grant No.:	2001

Development Number Name/HA-Wide Activities	All Funds Obligated			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised (Attach explanation)	Actual	Original	Revised (Attach explanation)	Actual	
TX-1	6/2004			6/2005			